

2700 INTERNAL TRANSFER REQUEST FOR S.N.

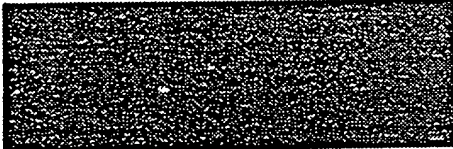
09/489627

| | |
|--------------------------|--|
| DATE: <u>1/29/00</u> | FROM: <u>Revised</u> (print name) |
| FORWARD TO: | REASON(S): |
| A. Art Unit: <u>2756</u> | A. You had Parent <input type="checkbox"/> (check box) |
| B. Class: <u>709</u> | B. See Title <input type="checkbox"/> (check box) |
| C Subclass: <u>203+</u> | C. See Abstract <input type="checkbox"/> (check box) |
| | D. See Claim(s): <input checked="" type="checkbox"/> |

FURTHER EXPLANATION IF NEEDED:

| | |
|--------------------|--|
| DATE: _____ | FROM: _____ (print name) |
| FORWARD TO: | REASON(S): |
| A. Art Unit: _____ | A. You had Parent <input type="checkbox"/> (check box) |
| B. Class: _____ | B. See Title <input type="checkbox"/> (check box) |
| C Subclass: _____ | C. See Abstract <input type="checkbox"/> (check box) |
| | D. See Claim(s): _____ |

FURTHER EXPLANATION IF NEEDED:

| | |
|---|--|
| DATE: _____ | FROM: _____ (print name) |
| FORWARD TO CLASSIFIER | REASON(S): |
|  | A. You had Parent <input type="checkbox"/> (check box) |
| | B. See Title <input type="checkbox"/> (check box) |
| | C. See Abstract <input type="checkbox"/> (check box) |
| | D. See Claim(s): _____ |

FURTHER EXPLANATION IF NEEDED:

DISPOSITION BY 2700 CLASSIFICATION

| | |
|--------------------|--|
| DATE: _____ | CLASSIFIER: _____ |
| FORWARD TO: | REASON(S): |
| A. Art Unit: _____ | A. You had Parent <input type="checkbox"/> (check box) |
| B. Class: _____ | B. See Title <input type="checkbox"/> (check box) |
| C Subclass: _____ | C. See Abstract <input type="checkbox"/> (check box) |
| | D. See Claim(s): _____ |

FURTHER EXPLANATION IF NEEDED: